FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6) AND/OR** UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY Date Received

				(6.7 <u>2</u>	A S.M.
Name of Offering (check if this Offer and sale of Series A Preferred S	is is an amendment and name has changed, and Stock.	d indicate change	:.) /s		TUING
Filing Under (Check box(es) that app Type of Filing: New Filing	ply): □ Rule 504 □ Rule 505 図 Ru □ Amendment	ıle 506 □ S	Section 4(6)	HOF 1 # 20	
	A. BASIC IDENTIFICATIO	N DATA	Mar.	7	100
1. Enter the information requested al	bout the issuer		N.	Tro de	
Name of Issuer (☐ Check if this is B*tween Productions, Inc.	s an amendment and name has changed, and in	dicate change.)			
Address of Executive Offices 1666 Massachusetts Avenue, Suite 1			Telephone Numbe (781) 863-8228		
Address of Principal Business Opera (if different from Executive Offices)		ate, Zip Code)	Telephone Numbe	r (Including Area	Code)
Brief Description of Business To develop and sell books, fashion pr	roducts, accessories, videos and other products			RECD OCT 1	
Type of Business Organization					
	limited partnership, already formedlimited partnership, to be formed	□ c	ther (please specify)		1086
Actual or Estimated Date of Incorpor Jurisdiction of Incorporation or Organ	ration or Organization: Inization: (Enter two-letter U.S. Postal Service CN for Canada; FN for other foreign	0 2 abbreviation for	☐ ⊠ Actual	□ Estimated □ E	PROCESSE
GENERAL INSTRUCTIONS				1/	UCT 1 9 2004
Federal:				K	. The same
Who Must File: All issuers making a et seq. or 15 U.S.C. 77d(6)	an offering of securities in reliance on an exem	ption under Regu	alation D or Section 4	4(6), 17 CFR 230.	5 HOMSON FINANCIAL
Securities and Exchange Commission	I no later than 15 days after the first sale of secon (SEC) on the earlier of the date it is received due, on the date it was mailed by United States	by the SEC at the	e address given belov	w or, if received a	

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. SEC 1972 (6-02) 1 of 8

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	■ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)			1. 11. 1	
Swartz, Addie					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
1666 Massachusetts Avenue, Car	nbridge, MA 0242	0			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Rosen, Joel					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
840-3 ORNAC, Concord, MA 01	742				
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
Full Name /Lest name Cost (Cine	lt(d1)				Managing Partner
Full Name (Last name first, if ind	nvidual)				
Begley, Lawrence					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Mulekick Ventures LLC, 20 Park	Plaza, Suite 426,	Boston, MA 02116			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Bubnovich, Desa		·			
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
PA1 Chalass Assess Dishessed	CA 04901 3135				
801 Chelsey Avenue, Richmond, Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if ind	ividual)				
Young, Brace					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
7 Shawkemo Road, Nantucket, M	IA 02554				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
Full Name (Last name first, if ind	lividual)				Managing Partner
(····,				
Business or Residence Address	Numbe	er and Street, City, State, Z	(in Code)		
business of Residence Address	(14dillo	er and Street, City, State, 2	inp code)		
Charle Day(as) that Assume	5 D	5 D 6	T Properties Offices	D Diseases	☐ General and/or
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	□ Promoter	□ Reneficial Ouman	☐ Executive Officer	☐ Director	☐ General and/or
	☐ Promoter	☐ Beneficial Owner			Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, Z	Zip Code)		

				B. INF	ORMATIC	ON ABOU	Γ OFFERI	NG				
1 714 - 3-		1	*	1 11 .	1.		1	· · · ·				No
1. Has the iss	suer sola, o	or does the is	ssuer intend	to sell, to	non accredi	ted investo	rs in this of	tering?	••••	**********		⊠
			Ans	wer also in	Appendix,	Column 2,	if filing un	der ULOE.				
2. What is th	e minimun	n investmen	t that will b	e accepted	from any in	ndividual?					\$_25,00	<u>0*</u>
*Subject to th											Yes 1	No
3. Does the o	offering per	mit joint ov	vnership of	a single un	it?						⊠	
4. Enter the iremuneration agent of a bropersons to be Full Name (L.	for solicita ker or deal listed are a	tion of pure er registered issociated p	chasers in c d with the S ersons of st	onnection v SEC and/or	with sales of with a state	f securities or states, 1	in the offer ist the nam	ing. If a pe e of the bro	rson to be l ker or deale	listed is an er. If more	associated than five	d person or
Business or R	Residence A	Address (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi							-					
		or check ind					(DE)		CEL 1			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name n	ist, ii muivi	iduai)									
Business or R	laaidamma A	. d.d (A.l.)		tunnt City	Charles 7: a (7-4-1	···					
Dusiness of N	lesidence A	raaress (ivu	moer and S	neet, City,	State, Zip	Lode)						
Name of Asso	naintad Dua	lean on David				 						
Name of Asso	ociated Bro	iker or Dean	ег									
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		cisted Has S			Solicit Purc	nasers		••••••			🗖 🗸	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	idual)									
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi												
-		or check ind										All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 Enter the aggregate offering price of securities included in this offering and the total am already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange check this box and indicate in the columns below the amounts of the securities offere and already exchanged. 	offering,	
, ,	Aggregate	Amount Already
Type of Security	Offering Price	
Debt		\$
Equity	\$ <u>1,200,000</u>	\$ <u>870,000</u>
☐ Common ☑ Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	\$	\$
Total	\$	\$
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securioffering and the aggregate dollar amounts of their purchases. For offerings under Rule 5 the number of persons who have purchased securities and the aggregate dollar amount of on the total lines. Enter "0" if answer is "none" or "zero."	504, indicate	Aggregate Dollar Amount of Purchases
Accredited Investors	10	\$ <u>870,000</u>
Non-accredited Investors		\$
Total (for filings under Dule 504 only)		¢
Total (for filings under Rule 504 only)		\$
3. If this filing is for an offering under Rule 504 or 505, enter the information requested fo sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months pri to the first sale of securities in this offering. Classify securities by type listed in Part C -	or	
Type of offering	Type of	Dollar Amount
Rule 505	Security	Sold \$
Regulation A		\$
Rule 504		\$
Total		<u></u> \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses. The information may be given as subject to future contingencies. If the amount of a is not known, furnish an estimate and check the box to the left of the estimate.	of the softhe issuer.	
Transfer Agent's Fees	[\$
Printing and Engraving Costs		\$
Legal Fees		3 \$ <u>15,000</u>
Accounting Fees	[\$
Engineering Fees	[□ \$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify) Blue Sky fees		₹ \$ 400
Total		3 \$ 15,400

C. OFFE	RING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS
l and total expenses furnisl	n the aggregate offering price given in response to Part C - Question ed in response to Part C - Question 4.a. This difference is the the issuer."	
used for each of the purposes estimate and check the box to	the adjusted gross proceeds to the issuer used or proposed to be hown. If the amount for any purpose is not known, furnish an the left of the estimate. The total of the payments listed must equal the issuer set forth in response to Part C - Question 4.b above.	
•		Payments to Officers, Directors, & Payments To Affiliates Others
	•	· - ·
Purchase of real estate		🗆 \$
Purchase, rental or leasing	and installation of machinery and equipment	🗆 \$
Construction or leasing of	plant buildings and facilities	🗅 \$
offering that may be used:	esses (including the value of securities involved in this n exchange for the assets or securities of another)	
	3	
• •		
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один (оронну):		
		- п \$ п \$
Column Totals		
Total Payments Listed (Co	umn totals added)	⊠ \$ 854,600
Total Payments Listed (Co	unii (vais aduct)	<u>а в азм,ооо</u>
	D. FEDERAL SIGNATURE	
following signature constitutes	tice to be signed by the undersigned duly authorized person. If this nan undertaking by the issuer to furnish to the U.S. Securities and Excished by the issuer to any non-accredited investor pursuant to paragr	change Commission, upon written request
ssuer (Print or Type)	Signature	Date
*tween Productions, Inc.	Ceddie St	Oct 14,200
lame of Signer (Print or Type)	Title of Signer (Print or Type)	
ddie Swartz	President and Chief Executive Officer of the Issuer	

--- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE							
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?								
	See Appendix, Column 5, for state response.							
2. The undersigned issuer hereby under Form D (17 CFR 239,500) at such to	takes to furnish to any state administrator of any state in witness as required by state law.	hich this notice is filed, a notice on						
The undersigned issuer hereby under issuer to offerees.	takes to furnish to the state administrators, upon written re	quest, information furnished by the						
limited Offering Exemption (ULOE	at the issuer is familiar with the conditions that must be sat c) of the state in which this notice is filed and understands t establishing that these conditions have been satisfied.							
The issuer has read this notification and undersigned duly authorized person.	knows the contents to be true and has duly caused this not	ice to be signed on its behalf by the						
Issuer (Print or Type)	Signature	Date						
B*tween Productions, Inc.	addie Sut	Oct 14, 200						
Name of Signer (Print or Type)	Title of Signer (Print or Type)							
Addie Swartz	President and Chief Executive Officer of the Issue	er.						

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Inten-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR	ļ			_		_			
CA				2	100,000	0	0		
СО							-		
CT DE						}			
DC	<u> </u>					Ç			
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IA	<u></u>								
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MA				8	770,000	0	0		
MI									
MN									
MS				· · · · · · · · · · · · · · · · · · ·					
МО									

APPENDIX

1	to non- investo	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT				•						
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
ОК			:							
OR										
PA										
RI										
SC										
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